

BEAUFORT OLE TOWNE ROTARY CLUB

Community Grant Application

We have two annual grant cycles during our fiscal year, one in the Fall and one in the Spring. (Please check with BOTR for the exact dates.) Generally submissions for Fall grants are October- November and Spring grant submissions are accepted February – March. Awarded grants are funded at the end of each cycle.

If you need assistance with the application, please contact our Community Service Chair, Dot Crumley (336-403-0599). Please mail the completed application to:

Beaufort Ole Towne Rotary Club, P.O. Box 737, Beaufort, NC 28516, Attention: Greg Sanders

If you prefer, you may email the completed application to [info@beaufortoletownerotary.com](mailto:info@beaufortoletownerotary.com)

• Date of Submission:

2. Organization Name:

Mailing Address:

E-mail:

Phone:

Is your organization a 501-c(3)

3. Contact Person:

Mailing Address: same as above

E-mail: same as above

Phone: same as above

4. Project Information:

Project Title:

Amount requested from Rotary:

Project start and end dates, if applicable:

5. Project Description:

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6. If this is a capital building expenditure, how will upkeep and replacement parts be funded?

7. Has this organization ever applied for funds from this Rotary before? If so, please indicate the amount of funds received, the date it was received, and for what purpose these funds were used.

8. How would partial funding impact this project/program?

9. How many people will be served by this project?

10. Describe how the project's success will be evaluated.

11. How will support by the Beaufort Ole Towne Rotary Club be acknowledged?

12. Project Financial Information (you may attach a worksheet if desired)

Total project costs:	Summarize Income Sources	Income
	a. donations	
	b. player fees	
	c. concession stand income	

d.

e.

Itemized Expenses

Expenses

13. The check should be made out to:

14. The check should be sent to (mailing address):

15. Authorized signature: The signature below is that of an authorized person that can testify as to the accuracy of the application and the person who agrees that acknowledgement for this project will be given to Beaufort Ole Towne Rotary Club and that all unused funds will be returned to this club.

Signature:

Title: President/Commissioner

Date:

Rotary Use Only:

Date submitted:

Member submitting (if applicable):

Date Considered:

Date Approved:

Amount Approved:

Date Payment Sent: